

**United States Bankruptcy Court**  
**Eastern District of Michigan**

In re **Roger L Esterwood**,  
 Debtor

Case No. **08-61078-swr**

Chapter **13**

**SUMMARY OF SCHEDULES - AMENDED**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>0.00</b>		
B - Personal Property	<b>Yes</b>	<b>6</b>	<b>56,396.38</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>3</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		<b>0.00</b>	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>1</b>		<b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>4</b>		<b>174,933.12</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>4,952.50</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>3,052.72</b>
Total Number of Sheets of ALL Schedules		<b>22</b>			
Total Assets			<b>56,396.38</b>		
Total Liabilities				<b>174,933.12</b>	

**United States Bankruptcy Court**  
**Eastern District of Michigan**

In re **Roger L Esterwood**

Debtor

Case No. **08-61078-swr**Chapter **13**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- ☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	<b>0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	<b>0.00</b>
Student Loan Obligations (from Schedule F)	<b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>0.00</b>
TOTAL	<b>0.00</b>

**State the following:**

Average Income (from Schedule I, Line 16)	<b>4,952.50</b>
Average Expenses (from Schedule J, Line 18)	<b>3,052.72</b>
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20 )	<b>8,565.85</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		<b>0.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	<b>0.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>0.00</b>
4. Total from Schedule F		<b>174,933.12</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>174,933.12</b>

In re **Roger L Esterwood**Case No. **08-61078-swr**

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## AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R  H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx1303  American Express c/o Becket and Lee Po Box 3001 Malvern, PA 19355	-		Opened 6/01/88 Last Active 6/05/08 CreditCard				24,158.96
Account No. xxxxxxxxxxxx7483  American Express c/o Becket and Lee Po Box 3001 Malvern, PA 19355	-		Opened 8/01/88 Last Active 7/11/08 CreditCard				12,533.50
Account No. xxxxxxxxxxxx5696  Assoc / Citi Attn: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195	-		Opened 4/01/74 Last Active 7/01/08 CreditCard				24,699.81
Account No. 3173  Bank of America Attn: Bankruptcy Dept NC4-105-03-14 Po Box 26012 Greensboro, NC 27420	-		Opened 6/01/81 Last Active 7/19/08 CreditCard				2,089.00
Subtotal (Total of this page)							63,481.27

3 continuation sheets attached

In re **Roger L Esterwood**Case No. **08-61078-swr**

Debtor

**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>3486</b>  <b>Bank of America</b> <b>Attn: Bankruptcy Dept NC4-105-03-14</b> <b>Po Box 26012</b> <b>Greensboro, NC 27420</b>	-	<b>Opened 8/01/82 Last Active 7/19/08</b> <b>CreditCard</b>				<b>1,039.00</b>
Account No. <b>xxxxxxx5082</b>  <b>Cap One</b> <b>Attn: C/O TSYS Debt Management</b> <b>Po Box 5155</b> <b>Norcross, GA 30091</b>	-	<b>Opened 11/01/85 Last Active 7/11/08</b> <b>CreditCard</b>				<b>4,825.61</b>
Account No. <b>xxxxxxx5817</b>  <b>Chase</b> <b>201 N Walnut Street</b> <b>Wilmington, DE 19801</b>	-	<b>Opened 5/01/93 Last Active 7/31/08</b> <b>CreditCard</b>				<b>3,339.00</b>
Account No. <b>xxxxxxx0078</b>  <b>Chase</b> <b>Attn: Bankruptcy Dept</b> <b>Po Box 100018</b> <b>Kennesaw, GA 30156</b>	-	<b>Opened 10/01/77 Last Active 7/01/08</b> <b>CreditCard</b>				<b>1,312.00</b>
Account No. <b>xxxxxxx2633</b>  <b>Citi</b> <b>Po Box 6241</b> <b>Sioux Falls, SD 57117</b>	-	<b>Opened 7/01/88 Last Active 7/23/08</b> <b>CreditCard</b>				<b>21,223.96</b>
Sheet no. <u>1</u> of <u>3</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>31,739.57</b>
Subtotal (Total of this page)						<b>31,739.57</b>

In re **Roger L Esterwood**Case No. **08-61078-swr**

Debtor

**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxxxx0081</b>  <b>Citi</b> <b>P.o. Box 6500</b> <b>Sioux Falls, SD 57117</b>	-	<b>Opened 4/01/84 Last Active 7/21/08</b> <b>CreditCard</b>				<b>4,693.96</b>
Account No. <b>xxxxxxxxxxxx1523</b>  <b>Citi</b> <b>Attn: Centralized Bankruptcy</b> <b>Po Box 20507</b> <b>Kansas City, MO 64195</b>	-	<b>Opened 7/11/89 Last Active 7/28/08</b> <b>CreditCard</b>				<b>9,708.07</b>
Account No. <b>xxxxxxxx8006</b>  <b>Discover Financial</b> <b>Attention: Bankruptcy Department</b> <b>Po Box 3025</b> <b>New Albany, OH 43054</b>	-	<b>Opened 3/01/90 Last Active 8/03/08</b> <b>CreditCard</b>				<b>5,158.13</b>
Account No. <b>xxxxxxxx1420</b>  <b>Dsnb Macys</b> <b>Attn: Bankruptcy</b> <b>6356 Corley Rd</b> <b>Norcross, GA 30071</b>	-	<b>Opened 9/01/89 Last Active 7/18/08</b> <b>ChargeAccount</b>				<b>1,174.41</b>
Account No. <b>0863</b>  <b>Fia Csna</b> <b>Po Box 26012</b> <b>Nc4-105-02-77</b> <b>Greensboro, NC 27410</b>	-	<b>Opened 5/01/86 Last Active 8/04/08</b> <b>CreditCard</b>				<b>7,653.00</b>
Sheet no. <b>2</b> of <b>3</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>28,387.57</b>

In re **Roger L Esterwood**Case No. **08-61078-swr**

Debtor

**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>0107</b>  <b>Fia Csna</b> <b>Po Box 26012</b> <b>Nc4-105-02-77</b> <b>Greensboro, NC 27410</b>			<b>Opened 7/01/87 Last Active 8/05/08</b> <b>CreditCard</b>				<b>947.00</b>
Account No. <b>xxxxxxxx1004</b>  <b>Natl Cty Crd</b> <b>Attention: Bankruptcy Department</b> <b>6750 Miller Road</b> <b>Brecksville, OH 44141</b>			<b>Opened 7/01/73 Last Active 8/07/08</b> <b>CreditCard</b>				<b>9,779.87</b>
Account No. <b>xxxxxxxx1149</b>  <b>Unv/citi</b> <b>Po Box 20507</b> <b>Kansas City, MO 64195</b>			<b>Opened 3/01/93 Last Active 7/07/08</b> <b>CreditCard</b> <b>Subject to setoff.</b>				<b>8,592.70</b>
Account No. <b>xxxxxxxxxxxx0959</b>  <b>Us Bank/na Nd</b> <b>4325 17th Ave S</b> <b>Fargo, ND 58125</b>			<b>Opened 3/01/87 Last Active 7/28/08</b> <b>CreditCard</b>				<b>20,991.70</b>
Account No. <b>xxxxxxxxxxxx5928</b>  <b>Visdsnb</b> <b>Bankruptcy</b> <b>6356 Corley Rd</b> <b>Norcross, GA 30071</b>			<b>Opened 11/01/06 Last Active 7/28/08</b> <b>CreditCard</b>				<b>11,013.44</b>

Sheet no. 3 of 3 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page)

**51,324.71**

Total  
(Report on Summary of Schedules)

**174,933.12**

In re **Roger L Esterwood**

Debtor(s)

Case No. **08-61078-swr****SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) - AMENDED**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
<b>Single</b>	RELATIONSHIP(S): <b>None.</b>	AGE(S):
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	<b>Compensation Manager</b>	
Name of Employer	<b>Borders Group, Inc.</b>	
How long employed	<b>13 years</b>	
Address of Employer	<b>100 Phoenix Drive Ann Arbor, MI 48103</b>	

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)  
2. Estimate monthly overtime

DEBTOR	SPOUSE
\$ <b>8,043.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>

3. SUBTOTAL

\$ <b>8,043.00</b>	\$ <b>0.00</b>
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4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security  
b. Insurance  
c. Union dues  
d. Other (Specify) **See Detailed Income Attachment**

\$ <b>2,493.00</b>	\$ <b>0.00</b>
\$ <b>133.50</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>464.12</b>	\$ <b>0.00</b>

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <b>3,090.62</b>	\$ <b>0.00</b>
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6. TOTAL NET MONTHLY TAKE HOME PAY

\$ <b>4,952.38</b>	\$ <b>0.00</b>
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7. Regular income from operation of business or profession or farm (Attach detailed statement)  
8. Income from real property  
9. Interest and dividends  
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above  
11. Social security or government assistance  
(Specify): \_\_\_\_\_

\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.12</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>

12. Pension or retirement income

13. Other monthly income

(Specify): \_\_\_\_\_

\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ <b>0.12</b>	\$ <b>0.00</b>
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15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$ <b>4,952.50</b>	\$ <b>0.00</b>
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

\$ <b>4,952.50</b>	
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(Report also on Summary of Schedules and, if applicable, on  
Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

**Bonus received in April of 2008 is an annual bonus and is reflected in Schedule I as part of salary at \$143/month.**

**Health Savings Account is now \$83.33 per month. Was averaging \$69 per month.**

**Debtor anticipates a 2% - 3% cost of living raise effective April 6, 2009. This is programmed into his income number on Schedule I, pro-rated.**

**Debtor will stop his 401(k) savings payroll deduction, effective, 12/5/08. Debtor no longer intends to take 401(k) distributions.**



In re Roger L Esterwood

Debtor(s)

Case No. 08-61078-swr

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) - AMENDED**  
**Detailed Income Attachment**

**Other Payroll Deductions:**

<b>Health Savings Account</b>	\$ <b>83.33</b>	\$ <b>0.00</b>
<b>401(k) Loan</b>	\$ <b>369.96</b>	\$ <b>0.00</b>
<b>Charitable Contribution</b>	\$ <b>10.83</b>	\$ <b>0.00</b>
<b>Total Other Payroll Deductions</b>	\$ <b>464.12</b>	\$ <b>0.00</b>

In re Roger L Esterwood

Debtor(s)

Case No. 08-61078-swr

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) - AMENDED

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)		\$	<u>1,216.00</u>
a. Are real estate taxes included?	Yes <u>    </u> No <u>X</u>		
b. Is property insurance included?	Yes <u>    </u> No <u>X</u>		
2. Utilities:		\$	<u>138.75</u>
a. Electricity and heating fuel		\$	<u>0.00</u>
b. Water and sewer		\$	<u>120.86</u>
c. Telephone		\$	<u>145.18</u>
d. Other <u>See Detailed Expense Attachment</u>		\$	<u>0.00</u>
3. Home maintenance (repairs and upkeep)		\$	<u>340.00</u>
4. Food		\$	<u>60.00</u>
5. Clothing		\$	<u>5.00</u>
6. Laundry and dry cleaning		\$	<u>55.00</u>
7. Medical and dental expenses		\$	<u>665.33</u>
8. Transportation (not including car payments)		\$	<u>100.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	<u>0.00</u>
10. Charitable contributions		\$	<u>17.92</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		\$	<u>24.18</u>
a. Homeowner's or renter's		\$	<u>0.00</u>
b. Life		\$	<u>0.00</u>
c. Health		\$	<u>0.00</u>
d. Auto		\$	<u>0.00</u>
e. Other <u>    </u>		\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		\$	<u>0.00</u>
(Specify) <u>    </u>		\$	<u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)			
a. Auto		\$	<u>0.00</u>
b. Other <u>    </u>		\$	<u>0.00</u>
c. Other <u>    </u>		\$	<u>0.00</u>
14. Alimony, maintenance, and support paid to others		\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home		\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	<u>0.00</u>
17. Other <u>See Detailed Expense Attachment</u>		\$	<u>164.50</u>

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 3,052.72

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

### 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	<u>4,952.50</u>
b. Average monthly expenses from Line 18 above	\$	<u>3,052.72</u>
c. Monthly net income (a. minus b.)	\$	<u>1,899.78</u>

In re Roger L Esterwood

Debtor(s)

Case No. 08-61078-swr

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) - AMENDED**  
**Detailed Expense Attachment**

**Other Utility Expenditures:**

<b>Cable</b>	\$	<b>99.23</b>
<b>Internet</b>	\$	<b>45.95</b>
<b>Total Other Utility Expenditures</b>	\$	<b>145.18</b>

**Other Expenditures:**

<b>Work lunch and coffee</b>	\$	<b>80.00</b>
<b>Hair cuts</b>	\$	<b>45.00</b>
<b>Gym/Health Club</b>	\$	<b>39.50</b>
<b>Total Other Expenditures</b>	\$	<b>164.50</b>

**United States Bankruptcy Court  
Eastern District of Michigan**

In re **Roger L Esterwood**

Debtor(s)

Case No. **08-61078-swr**

Chapter **13**

**STATEMENT OF ATTORNEY FOR DEBTOR(S)**  
**PURSUANT TO F.R.BANKR.P. 2016(b)**

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

1. The undersigned is the attorney for the Debtor(s) in this case.

2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]

☒ **FLAT FEE**

A.	For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid . . . . .	<u><b>3,000.00</b></u>
B.	Prior to filing this statement, received . . . . .	<u><b>1,005.00</b></u>
C.	The unpaid balance due and payable is . . . . .	<u><b>1,995.00</b></u>

☐ **RETAINER**

A. Amount of retainer received . . . . . \_\_\_\_\_

B. The undersigned shall bill against the retainer at an hourly rate of \$\_\_\_\_. [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

3. \$ **274.00** of the filing fee has been paid.

4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]

- A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- ~~D. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
- E. Reaffirmations;
- F. Redemptions;
- G. Other:

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

6. The source of payments to the undersigned was from:

- A. **XX** Debtor(s)' earnings, wages, compensation for services performed
- B. \_\_\_\_\_ Other (describe, including the identity of payor) \_\_\_\_\_

7. The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to be paid except as follows:

Dated: **November 28, 2008**

**/s/ Guy T. Conti**

Attorney for the Debtor(s)  
**Guy T. Conti 03673-2005 (NJ) P68889 (MI)**  
**The Law Offices of Guy T. Conti, PLLC**  
**302 N. Huron Street**  
**Ypsilanti, MI 48197**  
**888-489-3232 gconti@contilegal.com**

Agreed: **/s/ Roger L Esterwood**

**Roger L Esterwood**  
Debtor

Debtor

**UNITED STATES BANKRUPTCY COURT  
Eastern District of Michigan**

**COVER SHEET FOR AMENDMENTS**

**CASE NAME:** Roger L Esterwood

**CASE NUMBER:** 08-61078-swr

The enclosed documents amend the petition, schedule, statement of financial affairs, statement of income and expenses, matrix or summary of assets and liabilities.

**The purpose of this amendment is to:**

- ☐ Add creditors to schedule(s) \_\_\_\_\_. How many? \_\_\_\_  
(Use second page of this form to list creditors added).
- ☒ **\$26.00 Amendment Fee.** This fee is required whenever you add creditors to a case, delete creditors, change the amount of a debt or change the classification of a debt. The fee is not required when correcting addresses of previously listed creditors. It is not required when new schedules are filed in a converted case.
- ☐ Correct the addresses of creditors already listed on the schedules and matrix previously filed.  
(Use second page of this form).
- ☒ Other: (Provide detail of Amendment) **Summary of Schedules/Statistical Summary, Schedule F (with changes to amounts of debts), Schedule I, Schedule J, Rule 2016(b) Statement**
- ☐ **Amend Schedules and list of creditors.** Schedules must be verified by the debtor(s).
- ☐ **Amend Matrix.** Please do not send a matrix adding creditors to a case unless you also send the amended schedules. Do not send a new matrix to correct an address. Use the second page of this form. Pursuant to L.B.R. 1007-2 & 1009-1 an amendment to a matrix filed by a debtor without an attorney must have a complete paper copy attached to this form. Electronic filers must upload creditors to the ECF system.

**NOTE:** LBR 1009-1(b) requires the debtor to serve a copy of the amendment and the cover sheet for amendments on the trustee and all other entities affected by the amendment.

### **CORRECTIONS AND ADDITIONS TO MAILING MATRIX**

Use this section of the form to make corrections to the names and address of any creditors or parties in interest who are listed on the current matrix of the case.

**NAME OF CREDITOR** (As it now appears):

Previous address:

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(Please print)

Please change to:

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---

**NAME OF CREDITOR** (As it now appears):

Previous address:

---

---

---

(Please print)

Please change to:

---

---

---

**NAME OF CREDITOR** (As it now appears):

Previous address:

---

---

---

(Please print)

Please change to:

---

---

---

Use this section of the form to **IDENTIFY** creditors added to the schedules and matrix.

**NAME OF CREDITOR** (As it now appears):

Address

---

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(Please print)

**NAME OF CREDITOR** (As it now appears):

Address

---

---

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(Please print)

**FOR ADDITIONAL CHANGES COPY THIS SHEET AND CONTINUE**

Signature: /s/Guy T. Conti

**Guy T. Conti 03673-2005 (NJ) P68889 (MI)**

**Name of Attorney**

**302 N. Huron Street**

**Ypsilanti, MI 48197**

**734-272-4771**

**gconti@contilegal.com**

I/We do hereby affirm under penalty of perjury that I/we have read the foregoing form, *Cover Sheet for Amendments*, and all pleadings and attachments thereto, and do hereby affirm that the information contained herein is true and accurate to the best of my knowledge, information and belief.

Signature: /s/Roger L. Esterwood  
**Roger L Esterwood**  
Name of Debtor

Signature: \_\_\_\_\_  
Name of Joint Debtor, if applicable